

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ACHROMATIC PHASE SHIFT DEIVCE AND INTERFEROMETER USING ACHROMATIC PHASE SHIFT DEVICE
Attorney Docket Number::	2001-1020
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity
Given Name:: JOSEPHUS
Middle Name:: JOHANNES MARIA
Family Name:: BRAAT
City of Residence:: DELFT
State or Province of Residence::
Country of Residence:: THE NETHERLANDS
Street of Mailing Address:: PLEIN DELFTZICHT 18

City of Mailing Address:: DELFT
State or Province of Mailing Address::
Country of Mailing Address:: THE NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-2627 CA

Applicant Authority Type:: Inventor
Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity
Given Name:: HENRIK
Middle Name::
Family Name:: BOKHOVE
City of Residence:: GOUDA
State or Province of Residence::
Country of Residence:: THE NETHERLANDS
Street of Mailing Address:: WIJNRUITGAARDE 13

City of Mailing Address:: GOUDA
State or Province of Mailing Address::
Country of Mailing Address:: THE NETHERLANDS
Postal or Zip Code of Mailing Address:: NL-2503 TG

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

Representative Customer Number::	000466
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This applicatio	National Stage of	PCT/NL99/00558	9/8/99

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::